AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT
for the

District of Rhode Island

U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust _____ *Plaintiff(s)* v. James R. Court a/k/a James Court, Sovereign Bank n/k/a Santander Bank, N.A., and Portfo io Recovery Associates LLC _____ *Defendant(s)*	)))))))))))) Civil Action No.

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Sovereign Bank n/k/a Santander Bank
824 N. Market Street, Suite 100
Wi mington, DE 19801

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Catherine V. Eastwood - Korde & Associates, P.C.
900 Che msford Street, Suite 3102
Lowe , MA 01851

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: __February 06, 2017__   __/s/ David A. DiMarzio__
                                                          Clerk of Court

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No.

Suffolk County Sheriff's Department • 132 Portland Street, Boston, MA 02114 • (617) 704-6999

Suffolk, ss.

March 23, 2017

I hereby certify and return that on 3/17/2017 at 3:10 PM I served a true and attested copy of the Summons, Complaint and Cover Sheet in this action in the following manner: To wit, by delivering in hand to Bernardo Montanez, Process Clerk, agent and person in charge at the time of service for Sovereign Bank n/k/a Santander Bank, at Corporation Service Company 84 State Street Boston, MA 02109 . Attest/Copies ($5.00) Basic Service Fee (IH) ($30.00) Postage and Handling ($1.00) Travel ($1.00) U.S. District Court Fee ($5.00) Total: $42.00

Deputy Sheriff   John Cotter

_____
Deputy Sheriff

☐ Other *(specify):*

My fees are $ _____ for travel and $ _____ for services, for a total of $ ____0.00____ .

I declare under penalty of perjury that this information is true.

Date: _____

_____
Server's signature

_____
Printed name and title

_____
Server's address

Additional information regarding attempted service, etc: